PAGE 1 / 10

FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORIM	3X	For Othe	r Than An	Authorized	d Commi	ttee		Office U	se Only	
1. NAME OF COMMITTE	EE (in full)	TYPE OR	PRINT ▼		ample: If ty er the lines.		12FE4	1M5		
CITIZENS	4 ETHICS	IN GOVI	ERNMEN	Γ	1 1 1	1 1 1 1 1	1 1 1	1 1 1 1	1 1 1 1	, , , <b>,</b> ,
		4117 HI	LLSBORO PIĶ	_ <del></del>						
ADDRESS (num  ▼	nber and street)	SUITE 3	300-315							
than p	if different previously ed. (ACC)	NASHV					TN	37218	5	
2. <b>FEC IDEN</b>	ITIFICATION N	IUMBER <b>V</b>		CITY ▲			STATE A		ZIP CODE	E 🛦
C coo	0524082		(	3. IS THIS REPORT		NEW (N) OR		AMENDED (A)		
4. TYPE OF (Choose Or	REPORT		nthly port e On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5)		Aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) Non-Election 'ear Only) Dec 20 (M12)
(a) Quarte	erly Reports:		H	Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)	Ý	Non-Electiòn 'ear Only) Ian 31 (YE)
	pril 15 uarterly Report (	(Q1) (c)	12-Day	7 (N-1)				eral (12G)	-	Runoff (12R)
Q Ju	uly 15 Juarterly Report (	` `	PRE-Election Report for th		Primary (1 Convention		=	ial (12G)	П	iulioli (12h)
	ctober 15 Juarterly Report (	(Q3)			M M	/ D D /		Y	in the	
	anuary 31 ear-End Report (	(YE)	E	lection on					State of	
R	uly 31 Mid-Year eport (Non-electi ear Only) (MY)	on (d)	30-Day  POST-Election  Report for the		General (3	80G)	Runc	off (30R)	s	pecial (30S)
	ermination Repor FER)	t		lection on	M = M		Y " Y " Y	Y	in the State of	
5. Covering P	Period 1	M / D		018	through	12	31	/ Y Y 20	18	
I certify that I h	ave examined t			st of my kno	wledge and	d belief it is tr	ue, correct	and comple	te.	
Type or Print N	ame of Treasur		Clyde, , ,							
Signature of Tre	Brig easurer	ght, Clyde, , ,			[Electronica	ally Filed]	Date 1	2 M / D 26		2018
NOTE: Submissi	on of false, erro	neous, or inc	complete inform	nation may si	ubject the p	erson signing	this Report	to the penalti	es of 52 U	.S.C. § 30109
Office Use									FORN Rev. 05/201	

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### CITIZENS 4 ETHICS IN GOVERNMENT

_	CITIZENS 4 ETHICS IN GOVERN	NVIENI	
R	Report Covering the Period: From:	11 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	o: 12 / 31 / 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		1611.34
	(b) Cash on Hand at Beginning of Reporting Period	1611.34	
	(c) Total Receipts (from Line 19)	0.00	0.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1611.34	1611.34
<b>7</b> .	Total Disbursements (from Line 31)	1611.34	1611.34
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
).	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	the Committee (Itemize all on Schedule C and/or Schedule D)	151388.66	

#### For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### CITIZENS 4 ETHICS IN GOVERNMENT

I. Receipts	R	eport Covering the Period: From:	M / 27 / Y 2018 To:	12 31 2018		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		I. Receipts				
(i) Itemized (use Schedule A)	11.	(a) Individuals/Persons Other				
(iii) TOTAL (add Lines 11(a)(i) and (ii)			0.00	0.00		
Lines 11(a)(i) and (ii)			0.00	0.00		
(c) Other Political Committees (such as PACs)			0.00	0.00		
(such as PACs)			0.00	0.00		
Totals to Line 33, page 5)		(such as PACs)(d) Total Contributions (add Lines	0.00	0.00		
Party Committees	40	Totals to Line 33, page 5)▶	0.00	0.00		
14. Loan Repayments Received	12.		0.00	0.00		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	13.	All Loans Received	0.00	0.00		
(Carry Totals to Line 37, page 5)		Offsets To Operating Expenditures	0.00	0.00		
Political Committees	16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00		
(Dividends, Interest, etc.)	47	Political Committees	0.00	0.00		
(from Schedule H3)		(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))  19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))  20. Total Federal Receipts		• •	0.00	0.00		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶  20. Total Federal Receipts		(b) Levin Funds (from Schedule H5)	0.00	0.00		
12, 13, 14, 15, 16, 17, and 18(c))▶ 0.00 0.00  20. Total Federal Receipts		(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	19.		0.00	0.00		
	20.	·	0.00	0.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page **4** 

II. Disburse	ments	COLUMN A Total This Period	Colondar Year to Date
. Operating Expenditures:		IOIAI IIIIS PERIOD	Calendar Year-to-Date
(a) Allocated Federal/N Activity (from Sche			
		0.00	0.00
` '	hare	0.00	0.00
(b) Other Federal Ope		0.00	0.00
Expenditures (c) Total Operating Expenditures		0.00	0.00
	, and (b))	0.00	0.00
Transfers to Affiliated/O			4 4
Committees	•	0.00	0.00
Contributions to Federal Candidates/Cor	nmittees		
and Other Political Com	mittees	0.00	0.00
Independent Expenditur		0.00	0.00
(use Schedule E) Coordinated Party Expe	nditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)		0.00	0.00
(400 00.1044.0 1 )		45 45	0.00
Loan Repayments Made	e	1611.34	1611.34
	-		
Loans Made Refunds of Contribution	s To:	0.00	0.00
(a) Individuals/Persons	Other		
Than Political Com	mittees	0.00	0.00
(b) Political Party Com	mittees	0.00	0.00
(c) Other Political Com		0.00	0.00
(such as PACs)		0.00	0.00
(d) Total Contribution F			4 4
` '	o), and (c))	0.00	0.00
	, L	4 4	4 4
Other Disbursements (In			
Non-Federal Donations).		0.00	0.00
Federal Flection Activity	(52 U.S.C. § 30101(20))		
(a) Allocated Federal E			
(from Schedule H6	•		
(i) Federal Share		0.00	0.00
	-		
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Ad			
Entirely With Feder (c) Total Federal Election		0.00	0.00
	)(ii) and 30(b))	0.00	0.00
200 00(4)(1), 00(4	)(ii) and 55(5))	0.00	0.00
Total Disbursements (ad	ld Lines 21(c) 22		
23, 24, 25, 26, 27, 28(0		1611 24	1611.34
, , , -, ,(-	\-\(\frac{\zeta}{1}\)	1611.34	1011.34
Total Federal Disbursen			
(subtract Line 21(a)(ii) a			
from Line 31)	•••••••••••••••••••••••••••••••••••••••	1611.34	1611.34

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 0.00 0.00 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 0.00 0.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 0.00 0.00 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 0.00 0.00 (subtract Line 37 from Line 36) ......

### 17

SCHEDULE B (FEC Form 3X)	Hoe ser	I lloo concrete cohodulo(o) I			E NUMBER: PAGE 6 OF 10			
ITEMIZED DISBURSEMENTS		Use separate schedule(s) (d) for each category of the		ly one)				
		Summary Page	21b		23 <b>x</b> 26 27 30b			
Any information copied from such Reports and State	 ements_mav	not be sold or us						
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
$ \: angle$ CITIZENS 4 ETHICS IN GOVERN	MENT							
Full Name (Last, First, Middle Initial)				İ				
A. Miller, Andrew, , , Jr.					Date of Disbursement			
					/ D D / Y Y Y Y Y			
Mailing Address 30 Burton Hills Blvd				12 26 2018				
City	State	Zip Code		FFC Idon	tification Number			
Nashville	TN	37215			tification Number			
Purpose of Disbursement Loan Repayment				C				
Candidate Name			Cotogony		saction ID : SB26.4150  If Each Disbursement this Period			
			Category/ Type	Amount				
	ement For:			1611.34				
Senate President		Primary General Other (specify) ▼						
State: District:	Other (spe	Scriy) ₩		Mem	o Item			
Full Name (Last, First, Middle Initial)								
B.				Date of D	Disbursement			
Mailing Address				M = M	/ D D / Y Y Y Y Y			
Mailing Address								
City	State	Zip Code		FEC Iden	tification Number			
Purpose of Disbursement				С				
	<u> </u>							
Candidate Name Category/					f Each Disbursement this Period			
Office Sought: House Disburs	ement For:		Туре					
Senate Disputs	Primary	General			7 1 7 1 7 1			
President	ecify)		Mem	o Item				
State: District:				Wienn				
Full Name (Last, First, Middle Initial)  C.				Date of F	Disbursement			
0.				M M	/ D D / Y Y Y Y			
Mailing Address								
City	State	Zip Code						
City	Otato	Zip Code		FEC Iden	tification Number			
Purpose of Disbursement								
Candidate Name								
Candidate Name			Category/ Type	Amount o	f Each Disbursement this Period			
Office Sought: House Disburs	ement For:		71: -		45 1 45 1 45 1			
Senate	Primary	, <u> </u>			,			
State: District:	Other (spe	ecity) ▼		Mem	o Item			
2.53.00.								
SUBTOTAL of Disbursements This Page (optional)			·····•		1611.34			
			<u> </u>	-	1611.34			
TOTAL This Period (last page this line number onl	y)			1	1011.54			

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 7 OF 10

		Detailed Sulfilliary Page   FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) CITIZENS 4 ETHICS IN GOVERN	IMENT	Transaction ID : SC/10.4111		
LOAN SOURCE Full Name (Last, First, M Miller, Andrew, , , Jr.	iddle Initial)	N ☐ Memo Item		
Mailing Address 30 Burton Hills Blvd		Other (specify) ▼		
City	State	ZIP Code		
Nashville	TN	37215		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
70000.00		1611.34 68388.66		
TERMS Date Incurred	Da	ate Due Interest Rate Secured:		
M 07	M M / D D	01/01/2025 0.00 <b>%</b> (apr) Yes <b>✗</b> No		
List All Endorsers or Guarantors (if any)	to Loan Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	,	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	,	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line on				
Carry outstanding balance only to LINE 3. Sc	nedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 8 OF 10

		Detailed Sufficially Page FOR LINE 13 OF FORM 3X			
IAME OF COMMITTEE (IN FUII) CITIZENS 4 ETHICS IN GOVERI	NMENT	Transaction ID : SC/10.4107			
LOAN SOURCE Full Name (Last, First, Miller, Andrew, , , Jr.	/liddle Initial)	N ☐ Memo Item			
Mailing Address 30 Burton Hills Blvd		Other (specify) ▼			
City	State	ZIP Code			
Nashville	TN	37215			
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period			
20000.00		13000.00 7000.00			
TERMS Date Incurred	Di	ate Due Interest Rate Secured:			
M 08 / D 06 / Y 2014	M = M / D = D	<sup>1</sup> 01/01/2022 0.00			
List All Endorsers or Guarantors (if any)	to Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)					
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this line or					
Carry outstanding balance only to LINE 3. S	chedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.			

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 9 OF 10

		Detailed Sulfilliary Page FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full) CITIZENS 4 ETHICS IN GOV	FRNMFNT	Transaction ID: SC/10.4109
LOAN SOURCE Full Name (Last, Fi Miller, Andrew, , , Jr.	rst, Middle Initial)	N
Mailing Address 30 Burton Hills Blvd		Other (specify) ▼
City	State	ZIP Code
Nashville	TN	37215
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period
70000.00		0.00 70000.00
TERMS  Date Incurred	Da	ate Due Interest Rate Secured:
M 08	M = M / D = D	<sup>1</sup> 01/01/2020 0.00 0.00
List All Endorsers or Guarantors (if	any) to Loan Source	
1. Full Name (Last, First, Middle Initia	1)	Name of Employer
Mailing Address		Occupation
City	zate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initia	1)	Name of Employer
Mailing Address		Occupation
City	zate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initia	1)	Name of Employer
Mailing Address		Occupation
City	zate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
City	zate ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (op	iional)	70000.00
TOTALS This Period (last page in this li		
Carry outstanding balance only to LINE	3. Schedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 10 OF 10

		Detailed Summary Page FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full) CITIZENS 4 ETHICS IN GOVERN	IMENT	Transaction ID : SC/10.4110
LOAN SOURCE Full Name (Last, First, M Miller, Andrew, , , Jr.	liddle Initial)	N
Mailing Address 30 Burton Hills Blvd		Other (specify) ▼
City	State	ZIP Code
Nashville	TN	37215
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
6000.00	-	0.00 6000.00
TERMS  Date Incurred	Da	ate Due Interest Rate Secured:
M 11	M = M / D = D	12/31/2029 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		6000.00
TOTALS This Period (last page in this line on	ly)	151388.66
Carry outstanding balance only to LINE 3. Sc	hedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.